



SIGN PERMIT APPLICATION

Materials and Equipment Required to Complete this work are subject to the Applicable Sales and Use Tax (Including Subcontractors)

CLASS of WORK:

New _____ Addition _____ Replace _____ Alteration _____ Repair _____ Move _____ Conversion _____

Sign Location:

Address: _____ Parcel Number: _____

Lot: _____ Block: _____ Subdivision: _____

Owner Name: _____ Owner Address: _____

Contractor:

Name as Licensed: _____ License Number: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ E-mail: _____

Electrical Contractor Name: _____

*****Electrical Contractor is required on any Electric sign, new or replaced*****

ZONE DISTRICT: _____ Corner Lot _____ Interior Lot _____

Location:	Yes	No	Features:	Yes	No
Entirely on Private Property			Will be Illuminated		
Entirely on Public Property*			If Yes, Light Source Concealed		
Partly Private/Partly Public Property*			Will have a Flasher		
Business or Boulevard			Will be Animated or Will have Intermittent Variation in Illumination or Physical Position		
Advertising			If Yes, RPM's		
Billboard					
Requires Revocable Permit					
Type of Sign:					
Ground			Roof		
			Pole		
If Wall Sign: Material: Wood _____ Metal _____					
Area of Sign (sq ft): _____		Type of Anchor: _____		Size of Anchor: _____	
Location of Anchor: _____			Weight of Sign: _____		
Constructed of:					
Plastic			Wood		
			Metal		
			Other		

VALUATION of WORK INCLUDING SIGNS & INSTALLATION: \$ _____

NOTE TO APPLICANT:

- Site Plan on 8 ½ x 11 paper indicating lot dimensions, streets, alleys, easements, all existing buildings, and proposed location of sign must be attached to this application.
- No part of a sign may be constructed with-in a public right of way or an easement (except "sign" easement)
- **IF** Engineering is required, Plans need to be submitted for Review.

For all work done under this application, the applicant accepts full responsibility for Compliance with the 2021 International Building Code and all other Applicable Ordinances.

APPLICANT

SIGNATURE: _____ **Date:** _____

Routing application needs to be completed.